

**BTEC CONFERENCE REGISTRATION**  
***Moving Forward in Childhood and Adult Brain Tumor Epidemiology***

**April 5-7, 2008 – Heidelberg**

Heidelberg Marriott Hotel

Vangerowstrasse 16

69115 Germany

**Registration Deadline: January 12, 2008**

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_  
(Name as to be printed on conference badge)

Institution/Organization: \_\_\_\_\_ Department: \_\_\_\_\_

Specialty: \_\_\_\_\_ Country: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Room request: \_\_\_\_\_ single \_\_\_\_\_ double \_\_\_\_\_ roommate

Dates: April 5 \_\_\_\_\_ April 6 \_\_\_\_\_

Special requirements (meals or services). \_\_\_\_\_

The Brain Tumor Epidemiology Consortium is a self-directing consortium empowered by its commitment to find “innovative” collaborations that will lead to a better understanding of the etiology, prevention and outcomes of brain tumors.

**Registration fees include \$25 per night toward housing on April 5 & 6, breakfast, lunch and dinner on April 6 and breakfast on April 7.** Rooms have been reserved at the Marriott Hotel ([www.marriotthotels.com/hdbmc](http://www.marriotthotels.com/hdbmc)) and are available on a first come basis at \$115 euros for single or double occupancy (includes \$25 BTEC subsidy per person per night). There is a substantial savings if you book with a roommate. BTEC will book rooms when registration and payment are received. Please list your roommate if you request a double on the registration form. We can also help you locate a roommate. Additional nights are **not** the responsibility of BTEC but may be arranged directly with the hotel by calling +49-6221-9080.

**Abstracts:** may be submitted to Dr. Brigitte Schlehofer, [b.schlehofer@dkfz-heidelberg.de](mailto:b.schlehofer@dkfz-heidelberg.de) (see attached information)

**Conference Registration DEADLINE: January 12, 2008      \$125.00 US Funds**

**To register:** Please complete and return the registration form to Carol Kruchko, BTEC Secretary/Treasurer by email [cbtrus@aol.com](mailto:cbtrus@aol.com). You may also fax the form to 630-655-1756 or send by mail along with the registration fees.

**PAYMENT METHOD: Check, money order or wire transfer made payable to BTEC**

**WIRE TRANSFER INSTRUCTIONS**

Northern Trust Company, 50 S. LaSalle, Chicago, IL 60675

Swift Code: CNORUS44

Bank Routing Number: 071000152

Credit Account: 2404737

Central Brain Tumor Registry of the United States

**Mail registration form and check to: Jeri Dolan, CBTRUS Administrative Assistant, 244 East Ogden, Suite 116, Hinsdale, IL 60521. We would also appreciate an additional confirmation by email or fax of the registration form as indicated under “to register”.**